FAYETTEVILLE POLICE DEPARTMENT FAYETTEVILLE, ARKANSAS 72701

GENERAL ORDER # 01

SUBJECT: WORKERS' COMPENSATION FORMS

CROSS-REFERENCE: City Policy HR-16, CALEA 22.1.3

DATE APPROVED BY COP: November 10, 2020

Mk layell
Chief Mike Reynolds

PURPOSE: To establish uniform guidelines for reporting on-the-job employee injuries to the City's Human Resource Division. Further, this general order will detail the proper method for completing the appropriate Arkansas Municipal League Workers' Compensation forms.

ORDER: All employees are directed to report all on-the-job injuries, no matter how minor, to the Human Resource Division and to their duty supervisor. After hours notification of on-the-job injuries to the Human Resource Division can be accomplished at the beginning of the following work day. However, the duty supervisor should be notified immediately in all cases involving on-the-job injuries [CALEA 22.1.3 d.].

PROCEDURE:

- 1) During regular business hours and in cases of minor injuries, the City's Human Resource Division will determine if the injured employee will be treated by a physician or will be transported to an emergency facility.
- 2) If an on-the-job injury occurs outside regular working hours and requires medical treatment, the employee should report to any area hospital or after-hours clinic. The employee should then inform the medical staff they are an employee of the City of Fayetteville and the injury is job-related. If the injury is serious enough to prevent the employee from returning to work on the next scheduled work day, the employee should contact his supervisor as soon as possible, and the supervisor shall ensure the City's Human Resource Division is notified.
- 3) As soon as an injury occurs, the employee is responsible for completing an Arkansas Workers' Compensation Commission WCC Form N and an "Employee's Report of Accident" form. The supervisor is responsible for reviewing the forms and making sure the employee has signed them in the appropriate places. The supervisor is also responsible for completing the "Supplement to the Employer's Report of injury". The injured employee may keep a copy of the reports. The back of the WCC FORM N is the form AR-N which contains information explaining the worker's rights and responsibilities. These three forms should be forwarded to the City's Human Resource Division via the chain of command through Administration. The law covered in the form AR-N basically means the employer

has a duty immediately following the injury of an employee to provide medical treatment. This gives the employer the right to select the physician or hospital. After the initial emergency treatment, the City will not pay for any medical expenses if the employee changes physicians, unless the employee follows the guidelines in the referenced form. All prescriptions needed by the employee as a result of a work-related injury must be filled at the Walgreens Pharmacy located at 300 E. Township Street or at Medical Arts Pharmacy located at 2515 Huntsville Road. The employee should tell the pharmacy "this is related to a Worker's Compensation injury", and the pharmacy will not charge the employee for the prescription. If these pharmacies are closed, the employee may fill the prescription at any local 24-hour Walgreens Pharmacy.

- 4) Failure to comply with the reporting procedures may subject the employee to disciplinary action.
- 5) Within twenty-four hours after any accident involving on-the-job injuries, the supervisor should see that all necessary forms are forwarded to the City's Human Resource Division via the Police Departments Administration.
- 6) It is the responsibility of all supervisors to see that all necessary forms are completed for on the-job injuries and to assist employees as needed in the location and completion of these forms. The Workers Compensation Reporting Packet is located as a fill-n-print document and can be accessed through City of Fayetteville Intranet (COFI)/Forms/Workers Compensation Reporting Packet.
- 7) All employees with lost work time injuries should contact the Human Resource Division as soon as possible.
- 8) If there is a change in the employee's work status or in their physical condition which could lead to a change in their work status, they must notify their supervisor promptly, and the supervisor will ensure the Human Resource Division is notified. Supervisors of employees with lost work time injuries should complete the form AR-S. This form reports any change-in-status for the employee. This includes an employee returning to their previous work duties.
- 9) An employee with lost work time injuries or restricted duty injuries must obtain a signed note from their physician stating approval to return to work. This note shall be submitted to the employee's supervisor, who will ensure the note is forwarded to the City's Human Resources Division through the chain of command before the employee will be allowed to resume his/her previous work duties.